

**CRF-BULK (Rev. 2/06)**

GEORGIA DEPARTMENT OF REVENUE eFile / ePay System  
P. O. BOX 49512  
ATLANTA, GEORGIA 30359-1512  
FAX: 404-417-4318  
NEED HELP? CALL (404) 417-4488

**BULK FILER REGISTRATION FORM**

A Bulk Filer (or Service Provider) is a third party who, by agreement, files electronic tax transactions, either in bulk or single entry online, on behalf of taxpayer clients.

Legal Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Federal ID Number \_\_\_\_\_ Social Security # (if sole proprietor) \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Telephone # \_\_\_\_\_ Contact Fax # \_\_\_\_\_

Contact E-mail Address \_\_\_\_\_

Upon receipt of this form, the department will send a letter to you specifically for bulk filers. A State Tax Identifier Number (STI) will also be provided by mail. If you already have an STI, a new number will not be issued. However, we will advise you of your STI number. Additional information for bulk filers may be found on our Web site at [www.etax.dor.ga.gov](http://www.etax.dor.ga.gov).

As a third party bulk filer, you have the option to file a client's transaction information individually online at the eFile website or to submit an electronic file containing transactions for multiple clients.

**Note: One electronic payment cannot cover multiple transactions.**

Name of Owner, Officer, Partner or Responsible Party \_\_\_\_\_

Signature of Owner, Officer, Partner or Responsible Party \_\_\_\_\_

Date \_\_\_\_\_

By submitting this registration form, the above party agrees to abide by the statutes and regulations of the State of Georgia in the filing of returns on behalf of taxpayers. This registration form does not grant power of attorney to the above party to act on behalf of the taxpayer regarding tax matters with the Georgia Department of Revenue or allow the above party to act as an agent of the department.

Bulk filers may wish to have a Georgia Power of Attorney form on file with the department for their clients. A Power of Attorney form is available at the Department's Internet site under "Forms and Publications."

Fax completed application to: (404) 417-4317  
Mail Completed application to: Georgia Department of Revenue  
PO Box 49512  
Atlanta GA 30359-1512  
E-Mail completed application to: [efile@dor.ga.gov](mailto:efile@dor.ga.gov)

If you have any questions concerning this application, contact the eFile & ePay Unit at (404)417-4488 or toll free at (888)604-9875. For more information, visit our website at [www.dor.ga.gov](http://www.dor.ga.gov).